Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

			S FILED - (Column					SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			22					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			2 5 minus 20=		* 5			X\$ 9=		OR	X\$18=	90
IND	EPENDENT CL	AIMS	W minus 3 =		* /			X42=		OR	X84=	84
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT			凶		+140=		OR	+280=	280
* If the difference in column 1 is I			less than z	ero, ente	r "0" in c	olumn 2	ı	TOTAL		OR	TOTAL	1194
CLAIMS AS AMENDED - PART II									OTHER	THAN		
		(Column 1)		(Colu		(Column 3)		SMALL	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CL AIM	=		X42=		OR	X84=	
Ŀ	FINST PRESE	INTATION OF WI	ULTIPLE DE	PENDEN	CLAIM			+140=.		OR	+280=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		40011. FEE		•	ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	<u> </u> *	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM		1	+140=		OR	+280=	
							L	TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	, <i>'</i>	ADDIT. FEE			ADDII. FEE	·
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL ALLA	=-		X42=	:	OR	X84=	
	TIHO! PHESE	NTATION OF M	ULTIPLE DE	PENDEN	I CLAIM		ľ	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								TOTAL				
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										<u> </u>		

## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

•		Total F	ee Calcul	ation	1		
	Fee Code	Total # Claims	Number Extra	x	Fee	· Fee	Total
	Sm./Lg.				Sm. Entity	Lg. Entity	
Basic Filing Fee	201/101						<u> </u>
Total Claims >20	203/103	-20	) =	x	<del></del>		:
Independent Claims >3	202/102	3		· X			: 
Mult. Dep Claim Present	204/104					-	·
Surcharge	205/105				<u> </u>		;
English Translation	139	•					
TOTAL FEE CALCULA	ATION						
Fees due upon filing t	the application:	77					
Total Filing Fees Due	= \$	2	7.0	<u>50</u>			·
Less Filing Fees Subn	nitted -\$		94.0	<u>D</u> .			
BALANCE DUE	= \$	C	8.7°C	00			·

FORM OIPE-RAM-01 (Rev. 12/97)

## NOTICE OF FEE DUE

DATE: 03-11-02/			S. P.TO				
DATE: $03-11-02$ TO: $U71417$							
FROM: Office of Initial Patent Examinat	ion		917				
SUBJECT: Fee Due							
APPLICATION NUMBER: 1008 7	364						
A fee is due for the attached document submit Office for the following reason. Please check authorization to charge a deposit account. If a charge the appropriate fee. If an authorization the fee deficiency.	the application authorization	on for the approon is present, plant	priate ease				
Insufficient fee by check							
☐ Insufficient funds in deposit account							
☐ Declined credit card							
☐ Non authorization for charge to deposit ac	count						
☐ No fee submitted per requirement *							
	×.	·					
The correct fee code: 103	amount	\$ 90					
The suspended fee code: 197	amount	-\$ <u>3</u>	<u> </u>				
Fee Due	amount	=\$ 87	· -				
If you have any questions, please contact Cynthia Streater at 703-306-5430 or Eleanor Kurtz at 703-308-3642.							
Terminal Operator AADoFo/			·				